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			PTO/SB/05 (03-01)
Please type a plus sign (+) inside this box	\rightarrow	\Box	Approved for use through 10/31/2002. OMB 0651-0032
ter the Panerwork Reduction Act of 1995	00 000000		U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorr	ney Docket No.	SDT 322	S
First I	nventor	Stephen F. Gass	ח
Title	MITER SAW WIT	H IMPROVED SAFETY SYSTEM	163

(Only for new nonprovisional applications under 37 CFR 1.53(b)) | Fxpress Mail Label No. | EV032206805US

	The applications under or OFN 1.50	(2//	.хр.оо	S Mail Label NO.	10002	2000	0300
	ATION ELEMENTS		ADI	DRESS TO:	Assistant C Box Patent		sioner for Patents
	ncerning utility patent application con	tents.			Washington		
1. X Fee Transmittal (Submit an original and	Form (e.g., PTO/SB/17) a duplicate for fee processing)		7.	CD-ROM or CD	-R in duplic	ate, larç	
	small entity status.		8. Nu	Computer Prog cleotide and/or Ami	no Acid Seq	<i>dix</i>) uence :	Submission
3. X Specification (preferred arrangeme	[Total Pages 22]		(# a.	applicable, all neces Computer Rea	,	(CRF)	
 Descriptive title 	e of the invention		1	Specification Seque			
- Statement Reg	ce to Related Applications garding Fed sponsored R & D				M or CD-R		es); or
- Reference to s	equence listing, a table,			ii. paper			
or a computer - Background or	program listing appendix		C.	Statements ve	arifuina idani	ity of a	hous sanies
- Brief Summan	of the Invention		_				
- Brief Description - Detailed Description	on of the Drawings (if filed)		I F	ACCOMPANYIN			
- Claim(s)	ipuor.		9. [& document(s))
- Abstract of the	Disclosure	_	10.	37 CFR 3.73(b) (when there is	i) Statement an assignee	, [Power of Attorney
4. X Drawing(s) (35 t	U.S.C. 113) [Total Sheets 05		11.	English Transl			applicable)
5. Oath or Declaration	[Total Pages 02]	12.	Information Dis		, C	Copies of IDS Citations
a. X Newly exec	cuted (original or copy)		13.	Preliminary An			
b. Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed)			14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				
i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) 15.			15.	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)			
named in the prior application, see 37 CFR 16 Nonpublication F			Request u	nder 35	U.S.C. 122		
(b)(2)(B)(i). Applicant must attach form PTO/SB/3			form PTO/SB/35				
6. Application Data Sheet. See 37 CFR 1.76 or its equivalent.							
17. Uner:							
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:							
Continuation	Divisional X Continuation-in-part	(CIP)		of prior application No	09,67	6 10	n
Prior application information.	Examiner B. Ashley		Ì	Group Art Unit. 37		<u> </u>	0
For CONTINUATION OR DIVIS	IONAL APPS only: The entire disclosur	e of the or	rior appl	iantian from which a		laratio	n is supplied under
	f the disclosure of the accompanying o relied upon when a portion has been in						rated by reference.
<u> </u>	19. CORRESP				application	parts.	
[;;*]	NEW COST CONTRACTOR	LA TRIA	NAL ADD	KE33			
X Customer Number or Bar Co	ode Label 27.630 (Insert Customer No. or Al	tach bar cod	le label he	or	Correspo	ndence a	ddress below
Name	SD3, LLC						
	22409 S.W. Newland	Road		***			
Address							
City	Wilsonville	Sta	ate	Oregon	Zip	Code	97070
Country	US	Teleph	one	(503)638-62			5036388601
Name (Bright						-	
Name (Print/Type)	Stephen F., Gass		Regi	stration No. (Attor	ney/Agent)	38,	462
Signature					J 5-4-	1 / 1	(100

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Complete (if applicable)

Telephone

FEE TRANSMITTAL

for FY 2002

X Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

370.00

Complete if Known			
Application Number			
Filing Date	January 16, 2002		
First Named Inventor	Stephen F. Gass		
Examiner Name			
Group Art Unit			
Attorney Docket No.	SDT 322		

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)
X Check Credit card Money Other None	3. ADDITIONAL FEES
Deposit Account:	Large Entity Small Entity
Deposit Account	Fee Fee Fee Fee Fee Description Fee Pair Code (\$)
Number	105 130 205 65 Surcharge - late filing fee or oath
Deposit Account Name	127 50 227 25 Surcharge - late provisional filing fee or cover sheet
The Commissioner is authorized to: (check all that apply)	139 130 139 130 Non-English specification
Charge fee(s) indicated below Credit any overpayments	147 2 520 147 2 520. For filing a request for or parts regramination
Charge any additional fee(s) during the pendency of this application	112 920* 112 920* Requesting publication of SIR prior to
Charge fee(s) indicated below, except for the filing fee to the above identified deposit account	Examiner action
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month
Large Entity Small Entity	116 400 216 200 Extension for reply within second month
Fee Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 920 217 460 Extension for reply within third month
	118 1,440 218 720 Extension for reply within fourth month
101 740 201 370 Utility filing fee 370.00	128 1,960 228 980 Extension for reply within fifth month
107 510 207 255 Plant filing fee	119 320 219 160 Notice of Appeal
108 740 208 370 Reissue filing fee	120 320 220 160 Filing a brief in support of an appeal
114 160 214 80 Provisional filing fee	121 280 221 140 Request for oral hearing
SUBTOTAL (1) (\$) 370.00	138 1,510 138 1,510 Petition to institute a public use proceeding
	140 110 240 55 Petition to revive - unavoidable
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	The state of the s
Extra Claims below Fee Paid	
Independent 20 -20 = 0 1	143 460 243 230 Design issue fee
Claims	144 620 244 310 Plant issue fee
Multiple Dependent 140 = 0	122 130 122 130 Petitions to the Commissioner
Large Entity Small Entity	123 50 123 50 Processing fee under 37 CFR 1.17(q)
Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)
102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filing a submission after final rejection
104 280 204 140 Multiple dependent claim, if not paid	(37 CFR § 1.129(a)) 149 740 249 370 For each additional invention to be
109 84 209 42 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))
110 18 210 9 ** Reissue claims in excess of 20	179 740 279 370 Request for Continued Examination (RCE)
and over original patent	169 900 169 900 Request for expedited examination of a design application
SUBTOTAL (2) (\$) 0.00	Other fee (specify)
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)0.00

Name (Print/Type) 38,462 (503) 638-6201 Gass (Attorney/Agent) Signature 1/16/02

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